

June 25, 2015

Via Electronic Filing

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 14-58

> 2015 ETC Annual Report Pursuant to 47 C.F.R. § 54.313 and 54.422 2015 ETC Annual Report of Project Mutual Tel, Study Area Code 472231

Dear Secretary,

On behalf of Project Mutual Tel, we have attached for filing confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to 47 CFR 54.313 and 47 CFR 54.422 Project Mutual Tel seeks confidential treatment under the of the Commission's rules. Commission's existing confidentiality rules at 47 CFR 0.457 and 47 CFR 0.459 for the information filed pursuant to Section 54.313(a)(1) and Section 54.313(f)(2) of the Commission's regulations<sup>1</sup>. The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Sincerely,

/s/ Leah Richter Senior Financial Analyst Phone: (605) 995-1793 Fax: (605) 995-1778 Leah.Richter@Vantagepnt.com

Enclosure(s)

cc: Rick Harder, CFO & Treasurer, Project Mutual Tel

Charles Tyler, Telecommunications Access Policy Division

<sup>&</sup>lt;sup>1</sup> Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, 27 FCC Rcd 14231 (Wireline Comp. Bur. 2012) (Protective Order).

	REDACTED – FOR PUBLIC	CINSPECTIO	N		
FCC Foi	m 481 - Carrier Annual Reporting Data Collection Form		ON	C Form 481 IB Control No. 3060-0986/OMB Contro v 2013	ol No. 3060-0819
<010>	Study Area Code	472231			
<015>	Study Area Code Study Area Name	PROJECT MUTUAL TEI	-		
	·	2016			
<020>	Program Year	2016			
<030>	Contact Name: Person USAC should contact with questions about this data	Leah Richter			
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6059951793 ext.			
<039>	Contact Email Address: Email of the person identified in data line <030>	Leah.Richter@Vanta	agepnt.com		
				54.313 Completion	54.422 n Completion
ANNUA	AL REPORTING FOR ALL CARRIERS			Required	Required
<100>	Service Quality Improvement Reporting		(complete attached workshe		
<200>	Outage Reporting (voice)		(complete attached workshe	eet)	
<210>		outages to report		~	
<300>	Unfulfilled Service Requests (voice)			<del>-</del> -	
∠310 <b>&gt;</b>	Detail on Attempts (voice)				
<b>\310</b> >	betail of Attempts (voice)				
			(	'attach descriptive document)	
		<del></del>		V	111111
<320>	Unfulfilled Service Requests (broadband)				_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<330>	Detail on Attempts (broadband)				
				(attach descriptive document)	
<100>	Number of Complaints per 1,000 customers (voice)				
<410>	Fixed 0.0				1 , 1
<420>	Mobile 0.0				_
<430>	Number of Complaints per 1,000 customers (broadb	and)		<b>✓</b>	
<440> <450>	Fixed 0.0 Mobile 0.0				<u>.</u>
<500>	Service Quality Standards & Consumer Protection Ru	ules Compliance	(check to indicate certificat	ion)	V
	472231id510.pdf				
<510>			(attached descriptive do	cument)	V
					¬
<600>	Functionality in Emergency Situations 472231id610.pdf		(check to indicate certificat	ion)	<i>'</i>
	1. Bollacio. pal				
			(attached descriptive docum	ent)	ــــــالــ
<610>					
<700>	Company Price Offerings (voice)		(complete attached worksh	eet)	
<710>	Company Price Offerings (broadband)		(complete attached worksh		
<800>	Operating Companies and Affiliates		(complete attached worksh	- 1	
	Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability Certification	r	if yes, complete attached worksh Yes	eet)	
	472231id1010.pdf	L			
			Comments described as described		1
<1010>	•		(attach descriptive docume	ent) 🗸	
×1100	Contifue by the state of the st	as an Ne's C	<b>7</b>		*****
<1100>	<ul> <li>Certify whether terrestrial backhaul options exist (Y</li> </ul>	es or No)	(if not, check to indicate c	ertification)	
<1110>			(complete attached worksh		
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksh	neet)	
	Price Cap Carriers, Proceed to Price Cap Additional I				
<2000>	Including Rate-of-Return Carriers affiliated with Pri	ce Cap Local Exchang	ge Carriers (check to indicate certificati	ion)	1111111
<2005>			(complete attached worksh		
.2002	Rate of Return Carriers, Proceed to ROR Additional	Documentation Wor			
<3000> <3005>			(check to indicate certificati (complete attached workshi		
2000			,p	, i	A STATE OF THE OWNER, WHEN PERSON NAMED IN

(100) Se Data Co	(100) Service Quality Improvement Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	472231	
<015>	Study Area Name	PROJECT MUTUAL TEL	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@Vantagepnt.com	ш
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) (	
<111>>	If your answer to Line <110> is yes, do you have an existing $\S54.202(a)$ "5 year plan" filed with the FCC?	(yes / no )	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	472231id112.pdf	Jpo
	Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	m year	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received	Yes	
<115> <116> <117> <118>	How much (USF) was used to improve service quality and how support was used to improve service quality. How much (USF) was used to improve service coverage and how support was used to improve service coverage. How much (USF) was used to improve service capacity and how support was used to improve service capacity. Provide an explanation of network improvement targets not met in the prior calendar year.	we service quality  ove service coverage  ve service capacity  Yes  Yes	

Page 3

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

						<h></h>	Preventative	Procedures											
						\$	utage	Resolution											
						\$	Did This Outage Affect Multiple Study Areas												
						<e>&gt;</e>	Service Outage Description (Check	all that apply)											
						>	911 Facilities Affected	(Yes / No)											
	AL TEL			ext.	Leah.Richter@Vantagepnt.com	<c2></c2>	Total Number of	Customers											
472231	PROJECT MUTUAL TEL	2016	Leah Richter	)> 6059951793 ext.		<c1></c1>	Number of Customers Affected												
			s data	Contact Telephone Number - Number of person identified in data line <030>	Contact Email Address - Email Address of person identified in data line <030>	 b4>	Outage End Time												
			t regarding thi	rson identifiec	erson identified	<	Outage Start Outage End Date Time Date												
			should contac	Number of pe	l Address of pe	<bs></bs> 462>	Outage Start Time												
de	me		Contact Name - Person USAC should contact regarding this data	none Number -	Address - Emai	 b1>	Outage Start Date												
Study Area Code	Study Area Name	Program Year	Contact Name	Contact Teleph	Contact Email	<a>&gt;</a>	NORS Reference Number												
<010>	<015>	<020>	<030>	<032>	<039>	<220>		•	•						•			•	

ol No. 3060-0819										<b>\\</b>	Total per line Rates and Fees												
FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819	July 2013									<	Mandatory Extended Area Total p												
FCC	ylul									 b4>	State Universal Service Fee												
			AL TEL			xt.	Leah.Richter@Vantagepnt.com			<	State Subscriber Line Charge					See attached worksheet							
		472231	PROJECT MUTUAL	2016	Leah Richter	330> 6059951793 ext.		2015		 	Residential Local Service Rate					See a#							
					ing this data	ntified in data line <(	ntified in data line <	1/1/2015		 b1>	Rate Type												
ata					contact regardi	er of person ide	ss of person ide	ctive Date	ervice Charge	<a3></a3>	SAC (CETC)												
(700) Price Offerings including Voice Rate Data Data Collection Form		de	me		Contact Name - Person USAC should contact regarding this data	Contact Telephone Number - Number of person identified in data line <030>	Contact Email Address - Email Address of person identified in data line <030>	Residential Local Service Charge Effective Date	Single State-Wide Kesidential Local Service Charge	<a2></a2>	Exchange (ILEC)												
(700) Price Offerings inc Data Collection Form		Study Area Code	Study Area Name	Program Year	Contact Name	Contact Teleph	Contact Email	Residential Log	Single state-w	<a1></a1>	State												
(700) Pric Data Coll		<010>	<015>	<020>	<030>	<032>	<039>	<701>	<70/>>	<703>													

(710) Bro	(710) Broadband Price Offerings	FCC Form 481
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
		47223
<010>	<ul><li><uiu></uiu></li><li>Study Area Code</li></ul>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<015>	<015> Study Area Name	PROJECT MUTUAL TEL
<020>	<020> Program Year	2016
<030>	<030> Contact Name - Person USAC should contact regarding this data	Leah Richter
<032>	<035> Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> Leah. Richter@Vantagepnt.com	Leah.Richter@Vantagepnt.com

_													
<d4>&gt;</d4>	Usage Allowance Action Taken When Limit Reached {select}												
<d3></d3>	Usage Allowance (GB)												
<d2></d2>	Broadband Service - Upload Speed (Mbps)												
<d1></d1>	Broadband Service - Download Speed (Mbps)												
<>>>	Total Rate and Fees				pac	501							
<bs></bs> <bs></bs>       <br< td=""><td>State Regulated Fees</td><td></td><td></td><td></td><td>126116 200 -</td><td>workshoot</td><td>אסו עאו ופפר</td><td></td><td></td><td></td><td></td><td></td><td></td></br<>	State Regulated Fees				126116 200 -	workshoot	אסו עאו ופפר						
  	Residential Rate					•							
<a2></a2>	Exchange (ILEC)												
<a1></a1>	State												
<711>		<u> </u>				1				I		1	

20 (000)	(900) Oscarting Companies			
Data Col	(out) Operating Companies Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	472231		
<015>		PROJECT MUTHAL, TEI	. TRT.	
<020>		2016		
<030>		Leah Richter		
<035>		6059951793 ext.	:	
<039>			Leah.Richter@Vantagepnt.com	
<810>	Reporting Carrier Project Mutual Telephone Cooperative			
<811>				
<812>	Operating Company			
<813>	<a1></a1>		<a2></a2>	<83>
	Affiliates		SAC	Doing Business As Company or Brand Designation
		_		

(OOO) Tribal Lands Bonosting	FFF F. 101
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	472231
Study Area Name	PROJECT MUTUAL TEL
	2016
e - Person USAC should contact regarding this data	Leah Richter
<035> Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@Vantagepnt.com
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	
	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to \$54.313(a)(9) includes:  <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes <925> Compliance with Facilities Siting rules <926> Compliance with Environmental Review processes <927> Compliance with Cultural Preservation review processes <928> Compliance with Tribal Business and Licensing requirements.	Select Yes or No or Not Applicable

(1100) N	(1100) No Terrestrial Backhaul Reporting	FCC Form 481
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	
<015>	Study Area Name PROJECT MUTUAL TEL	JTUAL TEL
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	I e :
<032>	Contact Telephone Number - Number of person identified in data line <030> 6059951793 ext.	3 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030> Leah.Rich	Leah.Richter@Vantagepnt.com
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	

(1200) Te Lifeline Data Coll	(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
		0401 (55)
<010>	Study Area Code	472231
<015>	Study Area Name	PROJECT MUTUAL TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<032>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@Vantagepnt.com
		472231id1210.pdf
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
		Name of Attached Document
<1220>	Link to Public Website	HTTP http://www.pmt.org/residential/#phone
"Please c	"Please check these boxes below to confirm that the attached document(s), on line 1210,	
or tne we § 54.422	or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must	
annually report:	report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	<1223> Additional charges for toll calls, and rates for each such plan.	

(2000) Price Cap Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013

		PROJECT MUTUAL TEL		in Kichter	<pre></pre> <pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><pre></pre><p< th=""><th>Taah BichterdVantadennt.com</th></p<></pre>	Taah BichterdVantadennt.com
<010> Study Area Code	<015> Study Area Name	<020> Program Year	<030> Contact Name - Person USAC should contact regarding this data	<035> Contact Telephone Number - Number of person identified in data line <030>	<039> Contact Email Address - Email Address of person identified in data line <030>	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of incremental Connect America Phase I support, frozen High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b).(c).(d).(e). The information reported on this form and in the documents attached below is accurate.

							Г		
n tne documents attached below is accurate.			Name of Attached Document(s) Listing Required Information				formation s, and the		
Lonnect America Phase II support as set form in 47 CFK 9 54.513(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.	Incremental Connect America Phase I reporting  2nd Year Certification {47 CFR § 54.313(b)(1)i}  3nd Year Certification {47 CFR § 54.313(b)(1)ii}	• Attachment {47 CFR § 54.313(b)(1)ii}	Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)} 2013 Frozen Support Calculation {47 CFR § 54.313(c)(1)}	<ul> <li>2014 Frozen Support Calculation {47 CFR § 54.313(c)(2)}</li> <li>2015 Frozen Support Calculation {47 CFR § 54.313(c)(3)}</li> <li>2016 and future Frozen Support Calculation {47 CFR § 54.313(c)(4)}</li> </ul>	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification Support Used to Build Broadband	Connect America Phase II Reporting {47 CFR § 54.313(e)}  3rd year Broadband Service Certification  5th year Broadband Service Certification  Interim Progress Certification	Please check the box to confirm that the attached document(s), on line 2021,contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	Interim Progress Community Anchor Institutions	
Connect	<2010> <2011a>	<2011b>	<2012>	<2013> <2014> <2015>	<2016>	<2017> <2018> <2019>	<2020>	<2021>	

(3000) R	(3000) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
- <010>	Study Area Code	472231
<015>		PROJECT MUTUAL TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<0355	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	6059951793 ext. Leah.Richter@Vantadepnt.com
CHECK	the boxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that t	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47  CHE § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.
		472231id3010.pdf
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § $54.313(f)(1)(i)$ )	
(3011)	Name of Attached Document Listing Required In Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to \$54.313 (fl(1/ii)) the carrier shall provide the number names, and addresses of community anchor institutions to which becan	Name of Attached Document Listing Required Information 5012 contains the required information pursuant to which becan
	providing access to broadband service in the preceding calendar year.	#
		472231id3012.pdf
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	
(3013)	Is your company a Privately Held ROR Carrier	Name of Attached Document Listing Required Information (Yes/No)
(3014)	If yes, does your company file the RUS annual report	(Yes/No)
Please	e check these boxes to confirm that the attached document(s), on line 301 Electronic copy of their annual RUS reports (Operatine Report for	Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:
(2122)	Telecommunications Borrowers)	<b>]</b> [
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	Ish Flows
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
(3010)		Name of Attached Document Listing Required Information
(3018)		Jones Constant
(3019)	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications	ormat comparable to RUS Operating Report for Telecommunications
(3020)		
(3021)	Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit	ublic accountant that performed the company's financial audit
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to $\S$ 54.313( $f$ )(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RHS Operatins Report for Telecommunications	
	Borrowers,	
(3023)	Underlying information subjected to a review by an independent certified public accountant	
(3024)	_	ash Flows
		472231id3026.pdf
(3026)	Attach the worksheet listing required information	
		Name of Attached Document Listing Required Information

(appro) have of herdill carrier additional populations (continued)	FUC FORM 481	
Data Collection Form	OMB Control No. 3060-0986/01	OMB Control No. 3060-0819
	July 2013	

<010>	Study Area Code	472231
<015>	Study Area Name	PROJECT MUTUAL TEL
<020>	Program Year	2016
<030>	Oontact Name - Person USAC should contact regarding this data	Leah Richter
035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
139>	Contact Email Address - Email Address of person identified in data line <030>	Leah Bichter@Vantageont.com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



Name of Attached Document Listing Required Information

	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	472231
<015>	Study Area Name	PROJECT MUTUAL TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@Vantagepnt.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to	the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients
	onsibilities include ensuring the accuracy of the annual reporting requirements for universal service support on reported on this form and in any attachments is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	472231
<015>	Study Area Name	PROJECT MUTUAL TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leah Richter
<035>	Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Leah.Richter@Vantagepnt.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; my respon agent; and, to the best of my knowledge, the reports and data pro	is authorized to submit the information reported on behalf of the reporting carrier. sibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized vided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier: PROJECT MUTUAL TEL	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier: 472231	Filing Due Date for this form: 07/01/2015

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients or	n Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipie the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information rep	
Name of Reporting Carrier: PROJECT MUTUAL TEL	
Name of Authorized Agent or Employee of Agent: Leah Richter	
Signature of Authorized Agent or Employee of Agent:	Date: 06/24/2015
Printed name of Authorized Agent or Employee of Agent: Leah Richter	
Title or position of Authorized Agent or Employee of Agent Senior Financial Analyst	
Telephone number of Authorized Agent or Employee of Agent: 6059951793 ext.	
Study Area Code of Reporting Carrier: 472231 Filing Due Date for this form: 07/01/2015	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 4' 18 of the United States Code, 18 U.S.C. § 1001.	7 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

Attachments

(700) Price Offerings including Voice Rate Data Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	<010> Study Area Code	472331
<015>	<015> Study Area Name	PROJECT MUTUAL TEL
<020>	<020> Program Year	2016
<030>	<030> Contact Name - Person USAC should contact regarding this data	Leah Richter
<032>	<035> Contact Telephone Number - Number of person identified in data line <030> 6059951793 ext.	6059951793 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>	<030> Leah.Richter@Vantagepnt.com

<701> Residential Local Service Charge Effective Date
<702> Single State-wide Residential Local Service Charge

<703>

1/1/2015

	        	Man	State Universal Service Fee Service Charge	0.16 0.0	0.16 0.0	0.16 0.0	0.16 0.0	0.16 0.0
	 		State Subscriber Line Charge   S	0.0	0.0	0.0	0.0	0.0
	 	Residential Local	Service Rate	18.25	18.25	18.25	18.25	18.25
	 b1>	i c	Rate Type	FR	FR	FR	FR	FR
ervice Charge	<a3></a3>	0.00	SAC (CETC)					
Single State-wide Residential Local Service Charge	<a2></a2>	- L	Exchange (ILEC)	RUPERT	PAUL	MINIDOKA	NORLAND	OAKLEY
Single State	<a1></a1>	i	State	ID	ID	ID	ID	ID

Total per line Rates and Fees 18.41

18.41

18.41

18.41 18.41


(710) Broadband Price Offerings Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	rol No. 3060-0819
<010> Study Area Code		472231	
<015> Study Area Name		PROJECT MUTUAL TEL	
<020> Program Year		2016	
<030> Contact Name - Person US	<030> Contact Name - Person USAC should contact regarding this data	Leah Richter	
<035> Contact Telephone Numb	<035> Contact Telephone Number - Number of person identified in data line <030>	6059951793 ext.	
<039> Contact Email Address - En	<039> Contact Email Address - Email Address of person identified in data line <030> Leah. Richter @Vantagepnt.com	Leah.Richter@Vantagepnt.com	

<711>	<a1>&gt;</a1>	<a2></a2>	 >p1>	 	<c> <d1></d1></c>	<q2></q2>	<q3></q3>		<d4>&gt;</d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Broadband Service Usal Download Speed -Upload Speed (Mbps) (GB) (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	ID	RUPERT	28.95	0.0	28.95	3.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	36.95	0.0	36.95	5.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	47.95	0.0	47.95	7.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	63.95	0.0	63.95	12.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	79.95	0.0	79.95	15.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	89.95	0.0	89.95	20.0	1.0	0.666666	Other, Unlimited Access
	ID	RUPERT	79.95	0.0	79.95	5.0	2.0	0.666666	Other, Unlimited Access
	ID	RUPERT	89.95	0.0	89.95	10.0	2.0	0.666666	Other, Unlimited Access
	ID	RUPERT	99.95	0.0	99.95	15.0	2.0	0.666666	Other, Unlimited Access
	ID	RUPERT	109.95	0.0	109.95	20.0	2.0	0.888888	Other, Unlimited Access
	ID	PAUL	28.95	0.0	28.95	3.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	36.95	0.0	36.95	5.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	47.95	0.0	47.95	7.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	63.95	0.0	63.95	12.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	79.95	0.0	79.95	15.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	89.95	0.0	89.95	20.0	1.0	0.666666	Other, Unlimited Access
	ID	PAUL	79.95	0.0	79.95	5.0	2.0	0.696969	Other, Unlimited Access
	ID	PAUL	89.95	0.0	89.95	10.0	2.0	0.666666	Other, Unlimited Access
	ID	PAUL	36.95	0.0	99.95	15.0	2.0	0.666666	Other, Unlimited Access
	ID	PAUL	109.95	0.0	109.95	20.0	2.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	28.95	0.0	28.95	3.0	1.0	0.666666	Other, Unlimited Access

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	Code			472231				
<015>	Study Area Name	Name			PROJECT MUTUAL	TEL			
<020>	Program Year	ar			2016				
<030>	Contact Nar	Contact Name - Person USAC should contact regarding this data	uld contact regarding	this data	Leah Richter				
<032> (	Contact Tel	Contact Telephone Number - Number of person identified in data line	ber of person identi	ified in data line <030>	• 6059951793 ext.				
(660>	Contact Em	Contact Email Address - Email Address of person identified in data line <030>	dress of person ident	ified in data line <030.	> Leah.Richter@Vantagepnt.com	antagepnt.com			
<711>	<a1></a1>	<a2></a2>	 	 	<c> <d1></d1></c>	<d2></d2>	< <p>&lt;<p>&lt;<p>&lt;<p>&lt;<p>&lt;<p>&lt;<p>&lt;<p>&lt;<p></p></p></p></p></p></p></p></p></p>		<d4>&gt;</d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Broadband Service Download Speed - Upload Speed (Mbps) (GB)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	ID	MINIDOKA	36.95	0.0	36.95	5.0	1.0	0.686866	Other, Unlimited Access
	ID	MINIDOKA	47.95	0.0	47.95	7.0	1.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	63.95	0.0	63.95	12.0	1.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	79.95	0.0	79.95	15.0	1.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	89.95	0.0	89.95	20.0	1.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	79.95	0.0	79.95	5.0	2.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	89.95	0.0	89.95	10.0	2.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	99.95	0.0	99.95	15.0	2.0	0.666666	Other, Unlimited Access
	ID	MINIDOKA	109.95	0.0	109.95	20.0	2.0	0.666666	Other, Unlimited Access
	ID	NORLAND	28.95	0.0	28.95	3.0	1.0	0.666666	Other, Unlimited Access
	ID	NORLAND	36.95	0.0	36.95	5.0	1.0	0.666666	Other, Unlimited Access
	ID	NORLAND	47.95	0.0	47.95	7.0	1.0	0.666666	Other, Unlimited Access
	ID	NORLAND	63.95	0.0	63.95	12.0	1.0	0.666666	Other, Unlimited Access
	ID	NORLAND	79.95	0.0	79.95	15.0	1.0	0.686868	Other, Unlimited Access
	ID	NORLAND	89.95	0.0	89.95	20.0	1.0	0.666666	Other, Unlimited Access
	ID	NORLAND	79.95	0.0	79.95	5.0	2.0	0.666666	Other, Unlimited Access
	ID	NORLAND	89.95	0.0	89.95	10.0	2.0	0.888888	Other, Unlimited Access
	ID	NORLAND	99.95	0.0	99.95	15.0	2.0	0.666666	Other, Unlimited Access
	ID	NORLAND	109.95	0.0	109.95	20.0	2.0	0.686868	Other, Unlimited Access
	ID	OAKLEY	28.95	0.0	28.95	3.0	1.0	0.696966	Other, Unlimited Access
	ID	OAKLEY	36.95	0.0	36.95	5.0	1.0	0.666666	Other, Unlimited Access

(710) Br Data Co	(710) Broadband Price Offerings Data Collection Form	ice Offerings n						FCC Form 481 OMB Control	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
5	Sport Core	c po			150017				
\$015¢		Name			PROJECT MITTINAL TEL	TET.			
<020>		ear			2016				
<030>		Contact Name - Person USAC should contact regarding this data	d contact regarding	this data	Leah Richter				
<032>		Contact Telephone Number - Number of person identified in data line	ber of person identi	fied in data line <030>	> 6059951793 ext.				
<039>		Contact Email Address - Email Address of person identified in data line <030>	ress of person identi	ified in data line <030.	> Leah.Richter@Vantagepnt.com	antagepnt.com			
<711>	<a1>&gt;</a1>	<a2></a2>	  	<bs></bs> <bs></bs>       <br< th=""><th><c> <d1></d1></c></th><th><d2></d2></th><th><q3></q3></th><th></th><th><d4></d4></th></br<>	<c> <d1></d1></c>	<d2></d2>	<q3></q3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - B Download Speed	Broadband Service - Broadband Service Usag Download Speed - Upload Speed (Mbps) (GB)	Usage Allowance (GB)	Usage Allowance Action Taken When I mit Reached {celert}
	ID	OAKLEY	47.95	0.0	47 95	7.0	1 0		Other, Unlimited Access
	ID	OAKLEY	63.95	0.0	63.95	12.0	1.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	79.95	0.0	79.95	15.0	1.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	89.95	0.0	89.95	20.0	1.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	79.95	0.0	79.95	5.0	2.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	89.95	0.0	89.95	10.0	2.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	99.95	0.0	99.95	15.0	2.0	0.666666	Other, Unlimited Access
	ID	OAKLEY	109.95	0.0	109.95	20.0	2.0	0.666666	Other, Unlimited Access

## **PROJECT MUTUAL TEL (SAC 472231)**

### **ATTACHMENT LINE 112**

Service Quality Improvement Reporting Pursuant to 47 C.F.R § 54.313(a)(1)

ATTACHMENT REDACTED IN ENTIRETY

Attachment Line 510

CERTIFICATION OF PROJECT MUTUAL TEL

Reporting Period January 1 – December 31, 2014

Sec. 54.313(a)(5) Service Quality Standards and Consumer Protection Rules Compliance

Pursuant to § 54.313(a)(5) for High-cost Recipients, Carrier hereby certifies that it is in

compliance with applicable service quality standards and consumer protection rules.

Carrier completes installation requests and responds to service orders from existing and new

locations within 5 business days of the request to existing customers and within 10 days if a new

drop is required to reach a new customer. Carrier provides bill notification 30 days in advance of

any customer rate changes. Carrier provides notice to customers of their billing practices through

their terms and conditions located on their Carrier's website and in their retail office. An annual

Lifeline Notice is also printed in the local newspaper annually. Carrier's procedures for receiving

emergency calls during non-business hours include having a technician on call 24 hours a day, 7

days a week. Any after hour emergency calls are directed to a queue for emergency service which

is relayed to the technician on call. The technician then responds to all service related calls.

Carrier follows Customer Proprietary Network Information (CPNI) rules and also files the annual

CPNI certification with the FCC pursuant to the FCC's current CPNI rules and regulations.

Attached is an annual notice to customers on matters related to customer privacy. Carrier has

also implemented an Identity Theft Prevention Program in accordance with the federal Red Flags

Rule.

I verify that the foregoing is true and correct. Executed on June 22, 2015.

/s/ Rick Harder

Rick Harder, CFO & Treasurer, Project Mutual Tel

SAC: 472231

## REDACTED – FOR PUBLIC INSPECTION Please return this portion with your payment.

PO Box 366, Rupert, ID 83350

May 01, 2015

Attachment Line 510

\$.56

## PROJECT MUTUAL TELE CO-OP

Account

007136 0197

Phone Number (208) 434-7574

Please Pay this amount by 5/11/15 Amount you are enclosing: \$\_

> Please bill my Credit Card: \$\_ VISA DISCOVER

Signature:

Exp. Date: 3-Digit Sec. Code: Your security code is located on the back of your credit card, next to the

signature box.

150

Card #:

For important rate information from PMT, please see the included insert.

## ||գերատրեվ|ակիցթերհութը|||թգիտվ||լլատու PROJECT MUTUAL TELE CO-OP

Change of billing address Check here and make changes on the back





PROJECT MUTUAL TELE CO-OP

Account

007136 0197

Phone Number

(208) 434-7574

For Service at

701 6TH ST RUPERT, ID

Summary details on following pages Service from 05/01/15 through 05/31/15

Previous Balance	.00
Balance Forward	.00
PMT PHONE SERVICE	.00
PMT LONG DISTANCE	.48
Adjustments, Taxes and Fees	.08
TOTAL DUE BY 05/11/15	¢ 56

### **Payment Options**

Pay Online - Call PMT to set up e-billing and receive \$1.00 off your monthly bill. After you are set up, statements can be found and paid online. Just go to www.pmt.org and click on the e-billing link.

Pay by Mail - Detach the top portion of your statement and send it with your credit card information or check made payable to PMT in the enclosed envelope.

### Contact Us

For questions regarding you bill please contact your local PMT office in Burley 878-7151, Rupert 436-7151 or Twin Falls at 933-7151 or 1-800-322-4074. For questions regarding your PMT services or closed captioning concerns please call PMT's Repair Service at (208) 436-3122 or write to us at PO Box 366 Rupert, ID 83350 or by email to contactus@pmt.org



### Pay your bill online with PMT E-Bill

- ✓ Get a \$1 monthly credit for using E-Bill!
- ✓ SAVE time-you'll be done in no time!
- ✓ No envelopes, stamps or checks required!

### Give us a call to sign up.

Rupert 507 G St. 436-7151

Burley 1458 Overland Ave. 878-7151 Twin Falls 308 Shoshone St. East 933-7151

### **Billing Information**

### Charges are Billed in Advance.

Recurring monthly charges are billed one month in advance, such as calling plans, television and internet services.

### Discounts/Credits

You may receive discounts or credits due to a service change you've made to your account. Where this amount will appear depends on the change you made. You may find it under the Charge Detail section of your bill.

### **Partial Charges**

Partial monthly charges will occur if services are either added or removed during a billing cycle prior to the bill date. Services billed in advance are prorated, based on your installation or disconnect date, when they are added or removed during the billing cycle. The actual amount prorated is determined by the number of days the services were installed during the current billing cycle. This amount could be a credit, a charge or both depending on whether you added or removed a service and when you did so.

### **One-Time Charges**

One-time charges may include labor, set-up fees and activation fees for new services or features. This may also include cost of equipment or accessories (e.g. wireless phones, caller id box).

### When your BIII Is Due

Paying your bill by the "DUE DATE" should enable your payment to be processed before your next billing statement. If your payment is not received by the next billing statement then your account is subject to possible interruption of services for non-payment. If services are disconnected for non-payment, a late fee will be assessed on the next billing and possible deposits may be required for reconnecting services. A \$44.95 fee will be assessed for accounts requiring expedited service to reconnect services due to non-payment.

### **Insufficient Funds Payment Policy**

If your check, bankcard (debit or credit) charge or other instrument or electronic transfer transaction used to pay us is dishonored, refused, returned unpaid, or otherwise invalid for any reason, a processing fee of \$25 will be added to your bill.

### **Payment Arrangements**

A PMT representative is happy to discuss payment arrangements with you Monday- Friday,  $8\ \text{am}$  -  $6\ \text{pm}$ .

### **Call Blocking**

Protect yourself from fraudulent 3rd party charges on your telephone bill. PMT offers Call Blocking on 900 numbers for free. We also offer Deny +1 Dialing, which blocks long distance calls from being placed from your landline number, for \$2.50 per month.

### Attachment Line 510

### **Change of Billing Address**

Check the box on the front of this stub and fill in your new billing information below.

Street Address	Stateons		_
City	10		
State	-	Zip	
Home Phone	(	)	_
Work Phone	(	)	

### **Taxes & Fees Explained**

PMT is required by law to bill customers the following taxes and fees. These taxes and fees may change from time to time without notice.

### Sales Tax

Taxes assessed by state government on goods and services.

### **Telecommunications Relay Service Fund**

A state charge used to fund relay centers that assist hearing and speech impaired individuals to make and receive calls.

### Idaho Assistance Program

These monies help provide discounted telephone service to low-income, elderly or disabled customers who could not afford telephone services otherwise. For more information on Telephone Service Assistance or for eligibility contact the South Central Community Action Partnership at 678-3514 or 733-9351

### 911 Charge

A federal and state/local government charge to fund emergency services.

### **Universal Service Fund**

This state tax helps keep basic exchange rates affordable to all customers in the state. The funds are remitted to the state utility commission.

### **End User Charge**

The End User Charge is authorized by the Federal Communications Commission (FCC) for providing access to and maintaining local telephone service.

### Federal Excise Tax

This percentage based tax is assessed by the federal government for local telephone service.

### Federal Universal Service Charge (FUSC)

The Federal Universal Service Fund assists with the cost of providing affordable service to consumers living in high-cost service areas, rural areas and low-income individuals. It also helps provide service for schools, hospitals, libraries and rural health care providers.

### Cable Franchise Fee

Cable operators, such as PMT, are often required to pay a fee to the municipalities that they serve, for the rental of their right-of-way. Federal law permits this "franchise fee" to be passed through to subscribers. This fee appears on your monthly PMT billing statement as a separate line item.

Project Mutual Telephone Cooperative, Inc. provides the following basic telecommunications services throughout its "cooperative" designated service area: Attachment Line 510

- Voice grade service access to the public switched REDACTED - FOR network:
- Local exchange service including local usage free of per-minute charges: INSPECTION
  • Dual tone multi-frequency signaling;
- Single party service;
- Access to emergency services;
- Access to operator services;
- Access to directory assistance;
- Access to interexchange service;
- Toll blocking and 900 number blocking options

### Basic services are offered at the following rates:

Single-Line Residential Service\$19.75/month*
Single-Line and Multi-Line Business Service
\$31.30/month*
Residential Federal Subscriber End User Charge-Single Line\$6.50/month
Business Federal Subscriber End User Charge-Single Line
Business Federal Subscriber End User Charge – Multi Line \$9.20/month
Residential Touch Tone ServiceNo Charge
Business Touch Tone Service

\*The above rates do not include charges for long distance, operator services, Directory Assistance, 911 emergency services, or other taxes, fees and surcharges.

Discounts are available to low-income individuals who qualify for participation in Lifeline telephone assistance programs. One assistance credit is available per household. For more information concerning the Lifeline program please contact the South Central Community Action Partnership at 678-3514, 733-9351, or 800-627- 1733. Offi ces are located at 314 East 5th Street, Burley or 550 Washington Street South, Twin Falls.

For information about products and services, contact Project Mutual Telephone at (208) 878-7151, (208) 436-7151, (208) 933-7151 or (800) 322-4074. Project Mutual Telephone's addresses are 1458 Overland Ave, Burley 83318; 507 G St Rupert, ID 83350; 308 Shoshone St. E. Twin Falls, ID 83301.

Attachment Line 610

CERTIFICATION OF PROJECT MUTUAL TEL

Reporting Period January 1 – December 31, 2014

Sec. 54.313(a)(6) Ability to Function in an Emergency Situation

Pursuant to § 54.313(a)(6) for High-cost Recipients, Carrier hereby certifies that it is able to function in

emergency situations as set forth in § 54.202(a)(2). Carrier is able to remain functional in an emergency

situation through the use of back-up power to ensure functionality without an external power source.

Carrier is able to provide service for a reasonable period of time if external power is lost.

All locations requiring commercial power are equipped with an 8 hour battery backup and/or emergency

generators. The connection to the fiber electronics in the homes and businesses is also designed for eight

(8) hour battery backup. All electronic cabinets and remote electronic sites are equipped with the

necessary wiring and power supplies (rectifiers) to sustain operation beyond the eight (8) hours of battery

backup with the use of portable or fixed generators.

Battery backup is tested yearly by a designated employee. The designated employee tests the batteries

and replaces batteries that do not meet Carrier's specifications (8 hour backup) and cleans & replaces all

necessary connections. All batteries are on a replacement rotation, so are replaced regardless of how

they test, to ensure backup is secure. Emergency generators are tested annually by an outside contractor.

Carrier's network is engineered to handle reasonable excess traffic in the event of traffic spikes resulting

from emergency situations. Carrier's fiber ring technology protects well from loss of toll trunking. Carrier

has redundancy in its network for use in re-rerouting traffic when facilities are damaged.

I verify that the foregoing is true and correct. Executed on June 22, 2015.

/s/ Rick Harder

Rick Harder, CFO & Treasurer, Project Mutual Tel

SAC: 472231

Attachment Line 1010

CERTIFICATION OF PROJECT MUTUAL TEL

Reporting Period January 1 – December 31, 2014

47 CFR 54.313(a)(10) - Voice Services Rate Comparability

Pursuant to 47 CFR 54.313(a)(10) for High-cost Recipients, Carrier hereby certifies that the pricing

of Carrier's voice services is no more than two standard deviations above the applicable national average

urban rate for voice service, as specified in the most recent public notice issued by the Wireline

Competition Bureau and Wireless Telecommunications Bureau.

The WCB announced that the average local end-user rate plus state regulated fees of the

surveyed incumbent LECs in urban areas is \$47.48. This was published in the FCC's Public Notice, WC

Docket No. 10-90, DA 15-470, released April 16, 2015. Carrier's voice service rates are less than two

standard deviations in relation to the applicable 2015 national average urban rate as established by the

WCB.

I verify that the foregoing is true and correct. Executed on June 22, 2015.

/s/ Rick Harder

Rick Harder, CFO & Treasurer, Project Mutual Tel

SAC: 472231

47 CFR 54.422(a)(2) - Terms and Conditions for Lifeline Program Consumers

(1200)Terms and Conditions for Lifeline Program Consumers

Study Area Code: 472231

Study Area Name: Project Mutual Tel.

http://www.pmt.org/residential/#phone



Lifeline - Low Income Support

### What is Lifeline?

Lifeline is a government program that offers qualified low income households a discount on unlimited basic local telephone service with the availability of long distance restrictions. Through this government program you could save up to \$11.75 a month. This program can cover basic local telephone service charges, plus the subscriber line charge.

## What is the Cost of Landline Telephone Service?

PMT's basic local telephone service is \$18.25 plus applicable taxes and surcharges. Long distance toll charges will apply. For Example: If you choose PMT as your Preferred Interstate Carrier (PIC), long distance toll charges are currently \$.12 per minute. However, long distance toll blocking is provided to Lifeline customers at no charge.

### **Eligibility / Restrictions**

Lifeline can only be used for the primary telephone line in a household. You may purchase additional services available to a non-Lifeline customer. You must establish phone service prior to applying for the Lifeline discount. The name on the phone bill must match the name of the household member participating on the eligible program.

### How do I apply?

Eligibility is determined by the South Central Community Action Partnership at 1-800-627-1733.

### Do I Need to Apply Every Year?

Yes. If you still meet the eligibility criteria and wish to continue receiving financial assistance, you must re-apply every year.

### **More Information**

You can find this and more information about Lifeline at the website for <u>Universal Service</u> <u>Administrative Company</u>. Any additional questions can be answered by calling PMT at: (208) 436-7151 or 1-(800)-322-4074

Attachment Line 3010

REDACTED – FOR PUBLIC INSPECTION

CERTIFICATION OF PROJECT MUTUAL TEL

Reporting Period January 1 – December 31, 2014

Sec. 54.313(f)(1)(i) Milestone Certification

Pursuant to § 54.313 f)(1)(i) for Rate-of-Return Carriers, Carrier hereby certifies it is taking

reasonable steps to provide upon reasonable request broadband service at actual speeds of at

least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications,

including Voice over Internet Protocol, and usage capacity that is reasonably comparable to

comparable offerings in urban areas as determined in an annual survey, and that requests for

such service are met within a reasonable amount of time.

I verify that the foregoing is true and correct. Executed on June 22, 2015.

/s/ Rick Harder

Rick Harder, CFO & Treasurer, Project Mutual Tel

SAC: 472231

Attachment Line 3012

CERTIFICATION OF PROJECT MUTUAL TEL

Reporting Period January 1 – December 31, 2014

Sec. 54.313(f)(1)(ii) Community Anchor Institutions

Pursuant to § 54.313(f)(1)(ii) for Rate-of-Return Carriers, Carrier hereby certifies the following

number, names, and addresses of community anchor institutions to which the ETC newly began

providing access to broadband service in the preceding calendar year.

1. Minidoka Joint School District, Youth Ranch, 1275 N 400 E, Rupert, ID 83350

2. Minidoka Joint School District, Transportation Department, 311 7<sup>th</sup> St, Rupert, ID 83350

3. Minidoka Joint School District, Lunch Supervisor, 1201 D St, Rupert, ID 83350

4. Minidoka Joint School District, Rupert Elementary, 202 18<sup>th</sup> Street, Rupert, ID 83350

5. Bureau of Reclamation, Church of Jesus Christ LDS, 324 E 18<sup>th</sup> St, Rupert, ID 83350

All requests for broadband services, and speed, were fulfilled in 2014. Carrier continues to

monitor customer demand and technological innovation, planning to size its network in

anticipation of requests and demand for higher speed broadband needs.

I verify that the foregoing is true and correct. Executed on June 22, 2015.

/s/ Rick Harder

Rick Harder, CFO & Treasurer, Project Mutual Tel

SAC: 472231

## **PROJECT MUTUAL TEL (SAC 472231)**

### **ATTACHMENT LINE 3026**

Financial Reports
Pursuant to 47 C.F.R § 54.313(f)(2)

ATTACHMENT REDACTED IN ENTIRETY